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TRANSMITTAL FORM

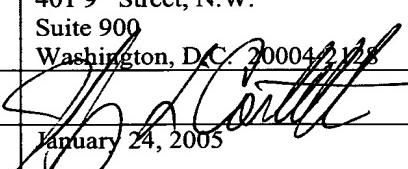
(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	10/603,019
	Filing Date
	First Named Inventor
	Group Art Unit
	Examiner Name
	Attorney Docket Number
	740756-2626

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Request for Reconsideration / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>
<div style="float: right; margin-right: 10px;"> <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number. </div> <div style="clear: both;"></div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm <i>or</i> Individual name	<u>Jeffrey L. Costella, Reg. No. 35,483</u> Nixon Peabody LLP 401 9 th Street, N.W. Suite 900 Washington, D.C. 20004-2128
Signature	
Date	January 24, 2005

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]

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Attorney Docket No. 740756-2626

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:)
Shunpei YAMAZAKI et al.) Group Art Unit: 2818
Application No. 10/603,019) Examiner: LE, Dung-Anh
Filed: June 26, 2003) Confirmation No. 3291
For: METHOD OF MANUFACTURING A) Date: January 24, 2005
SEMICONDUCTOR DEVICE HAVING
THIN FILM TRANSISTOR AND
CAPACITOR (AS AMENDED)

REQUEST FOR RECONSIDERATION

Mail Stop **AMENDMENT**
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed October 22, 2004, please consider the remarks in connection with the above-identified application as follows.